



WISCONSIN

DEPARTMENT OF WORKFORCE DEVELOPMENT
Division of Economic Support
Bureau of Work Support Programs

TO: **Economic Support Supervisors
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PRIORITY: URGENT

SUBJECT: **CHILD CARE PROVIDER FILE**

EFFECTIVE DATE: July 31, 2000

PURPOSE

This memo describes changes made to existing screens and functionality as well as the addition of new screens to the Child Care Payment System (CCPS) that relate to the Provider File. Upon implementation, CCPS will support collection and maintenance of more than one provider category per provider location. These changes are part of the Office of Child Care's long-range plan to build a statewide file of all regulated child care providers.

BACKGROUND

Currently, regulated child care provider information is maintained in 3 databases, including local child care certification agencies, the DHFS licensing database (CLICS) and CARES. The goal of the Provider File project is to create a statewide central repository of all regulated child care providers as part of CCPS. Phase I of the provider file will support the collection and maintenance of multiple provider categories at a provider location. Future phases of Provider File will automate the certification process and create an interface between Provider File and the DHFS licensing database (CLICS).

OVERVIEW OF PROVIDER FILE – PHASE I

The changes for Phase I of Provider File will provide the following new functionality:

1. Create and track multiple categories to a provider location and collect the actual effective date. Previous to Provider File, a provider location could only have one category identified at that location even if the provider location was both certified and licensed.

2. Collect the actual effective dates that a provider location category was accredited and/or serving relatives only. Previous to Provider File, there was a switch on CCPD where a "Y" could be entered in order to identify when a provider was accredited and/or serving relatives only.
3. Capture alternate address information for payments, notices and/or attendance report forms. Previous to Provider File, the only alternate address that could be entered was for payments and there was no option for alternate mailing addresses for notices or the attendance report forms.
4. Ability to enter unlimited comments for a provider location category.
5. Display all provider location categories along with the status of the category and the associated effective dates.
6. Display dates indicating the date and the reason that an authorization split. The screen will indicate a split only if the reason for the split is related to change in the provider category status, caring for relatives only status, accreditation status or adding a provider rate.

The Provider File will enhance CCPS as follows:

1. Authorizations will now be assigned based on a provider category hierarchy. For example if a provider is both certified and licensed for the period authorized, the authorization will be calculated using the licensed rates.

NOTE: If the provider changes from being certified to licensed (or vice versa) the worker will be required to enter an authorization for the period of time that the provider is certified and another authorization for the time period that the provider is licensed. CCPS will not split the authorization to calculate for each time period that the provider is certified or licensed. This is how authorizations were handled prior to Provider File when the provider changed from certified to licensed (or vice versa).

2. Ability to update provider headquarters to a location other than location 01. Prior to Provider File, location 01 was the only location that could be identified as the headquarters.
3. Query returns and recoveries for a provider issuance. CCRQ will serve as a summary of all negative adjustments entered to a provider. CCRD will show how the collection was made (either through recovery from the provider or recoupment from child care issuances).

NEW SCREENS

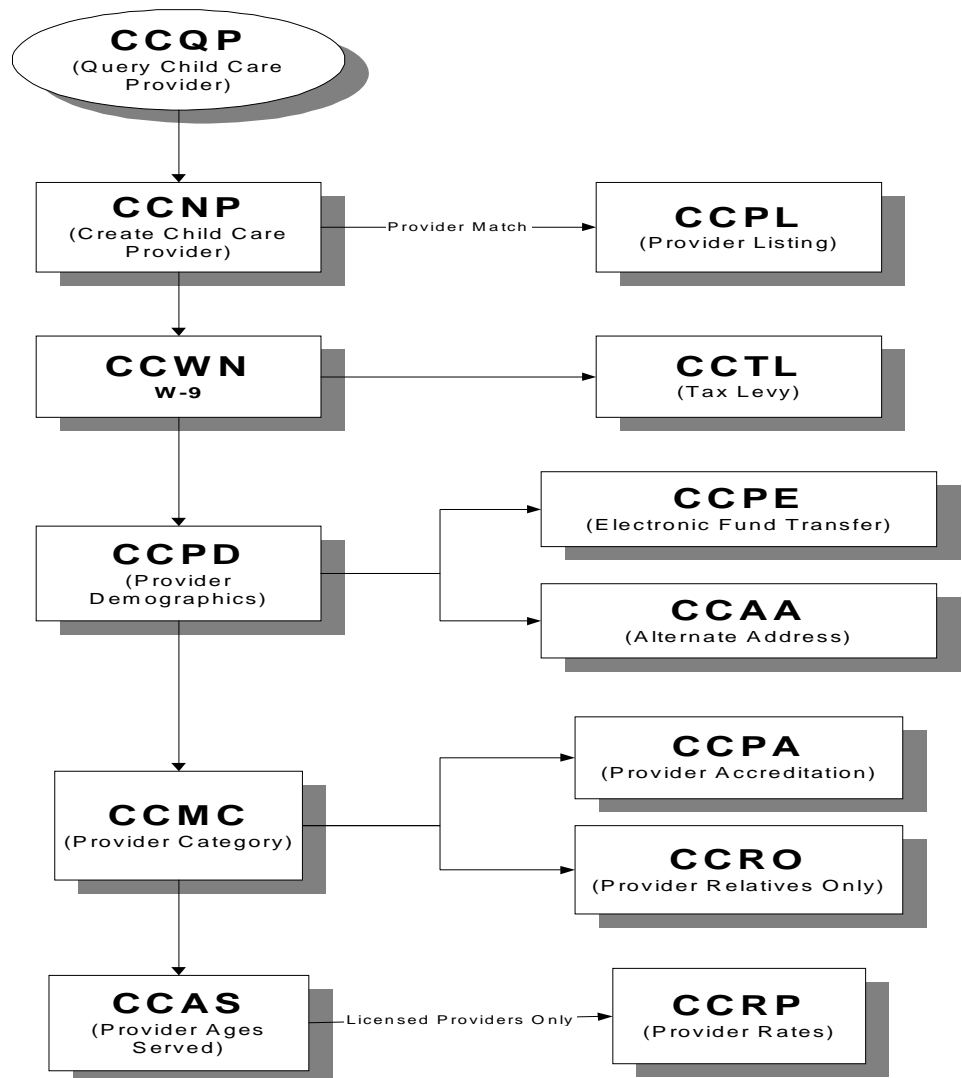
- | | |
|------|--|
| CCMC | This screen supports the collection and maintenance of the provider's location category. More than one category can be entered and maintained for a provider location. When entering information on this screen for the first time, a category begin date and a category status must be entered. |
| CCPA | This screen is used to enter the effective dates for when a provider location is accredited. When entering information on this for the first time, the accredited begin date must be entered. The accredited begin and end dates must lie between the category begin and end dates for which this accreditation is associated. |

- CCRO This screen is used to enter the effective dates for when a provider location is serving only relatives. When entering information on this for the first time, the relatives only begin date must be entered. The relatives only begin and end dates must lie between the category begin and end dates for which this period of serving relatives is associated.
- CCCQ This screen displays category information entered on CCMC – Maintain Provider Category – for a provider location. This information can also be displayed for a specific category at a specific date.
- CCPU This screen is used to enter comments about a provider location category. Comments can be entered on this entire screen and by pressing PF05 to refresh the screen, additional comments can be entered.
- CCSQ This screen displays the date and the reason that an authorization split. The screen displays a split only if the reason for the split is related to a change in the provider category status, caring for relatives only status or accreditation status.
- CCRQ This screen displays all negative adjustments for the provider.
- MNPQ MNPQ is the new Child Care Provider Query Menu. CCQP and CCAQ are now listed on MNPQ along with CCCQ, CCSQ and CCQU.

DRIVER FLOW

The driver flow for entering a new provider has changed to include CCMC, CCPA and CCRO. Once CCPD is completed, the driver flow will go to screen CCMC. If the provider has been indicated on CCMC as being accredited and/or serving relatives only, CCPA and/or CCRO will come up next in the driver flow. After CCPA and/or CCRO have been completed, CCAS will appear next. If the provider location is licensed, a public school or a certified school age program (see below); CCRP will appear next.

The driver flow for entering a new provider is shown in a flow chart on the next page.

CHILD CARE**CONVERSION**

The Provider File – Phase I will be in production on Monday, July 31, 2000. All providers that were entered into CARES prior to that date will go through a conversion process. The conversion will be automated and will occur the weekend of July 29 – 30, 2000.

Following are changes that will result due to the conversion:

CHANGES TO CCPD

1. The Active switch on CCPD will display a space. The history of the use of that switch can still be seen by using a date in the parm.
2. The Category field has been removed from CCPD. The provider location category is on the new screen CCMC. CCMC allows more than one provider category to be entered for each provider location.

3. The Relative Only switch will no longer appear on CCPD. The new screen CCRO will display the effective dates that a certified provider location cares for relatives only.
4. The Accreditation switch will no longer appear on CCPD. The new screen CCPA will display the effective dates that a provider location is accredited.
5. A new Headquarters (HQ) field is now on CCPD. The Headquarters field on CCPD is query only. The headquarters for each provider will be defaulted to location 01.
6. There is no longer a payment address on CCPD. If there was a payment address on CCPD at the time of conversion, the Alternate Address field (a new field to CCPD) will indicate a "Y". The new screen CCAA will display the payment address.

CHANGE TO CCWN

A new Headquarters field (HQ) on CCWN, which can be updated. After conversion, the headquarters will be defaulted to location 01 for all providers. If the provider has indicted another location as the headquarters, the headquarters location can be changed to another valid provider location . A valid provider location is one that exist in CCPS.

CHANGES TO CCQP

1. The Active field has been removed from CCQP.
2. The Delete Code field has been added to CCQP as well as the PF16 key to CCCQ. The delete code field indicates if the provider location has been deleted. CCCQ is a summary screen that displays each category, effective begin and end dates and category status.

CONVERSION TO CCAA

If there was a Payment Address on CCPD prior to conversion, the Alternate Address field on CCPD will be populated with a "Y". The payment address appears on screen CCAA.

CONVERSION TO CCMC

1. The provider number, name, location number, location name, address, and category from CCPD at the time of conversion will populate CCMC for every provider location.
2. Each provider location that is converted will have a status code of "CON" in the Status field on CCMC. THE CCMC SCREEN THAT SHOWS THE STATUS AS "CON" IS NOT UPDATEABLE.
3. To update the provider location information on CCMC for a provider location that went through the conversion process, PF5 on CCMC to refresh the screen and enter the category and status. The category begin date must be greater than the category begin date shown on CCMC for the provider location category with the status of "CON". CCPS will update effective end date on the "converted" CCMC screen. The effective end date on the converted screen is the date previous to the effective begin date that was entered by the worker on the updated CCMC screen.

Example: The category begin date on the converted CCMC screen is 02/09/00. In order to update CCMC, PF5 to refresh the screen. Enter the category and status. The earliest effective begin date is 02/10/00. The end date on CCMC for the converted screen that is filled in by the system is 02/09/00.

4. At the time of conversion, the Category Begin Date on CCMC will be the date the provider was first entered into CCPS or the begin date of the first authorization made to that provider on CCPS. The Category End Date field will be blank.
5. If the Active switch was "N" at the time of conversion, the Category End Date on CCMC will be the active effective date the "N" was entered on CCPD or the effective end date of the last authorization to that provider location, whichever date is later.
6. The Accredited field on CCMC will be "N" if the provider location was never indicated as being accredited on CCPD. If the Accredited switch on CCPD was ever "Y", the Accredited field will show a "Y" on CCMC, even if the provider location was not accredited at the time of conversion. The Accredited field on CCMC is used to indicate if a provider location has ever been indicated as being accredited in CCPS. CCPA will give the details of the effective dates that a provider location was accredited.
7. The Relatives Only field on CCMC will be "N" if the certified provider location was never indicated as serving relatives only on CCPD. If the Relatives Only switch on CCPD was ever "Y"; the Relatives Only field will show a "Y" on CCMC, even if the provider location was not caring for relatives only at the time of conversion. The Relative Only field on CCMC is used to indicate if a provider location has ever been indicated as caring for relatives only in CCPS. CCRO will give the details of the effective dates that a provider location was caring for relative only.
8. The Last Updated field on CCMC will be the updated date that was on CCPD at the time of conversion.
9. The Worker ID field on CCMC will be the Worker ID that was on CCPD at the time of conversion.

CONVERSION TO CCPA

If a provider location had been indicated on CCPD as accredited, the new screen CCPA will be completed with the category begin date (from CCMC), the location and address. The information displayed in the fields for accreditation begin date, last updated date and Worker ID on CCPA was taken from CCPD.

CONVERSION TO CCRO

If a provider location had been indicated as serving relatives only, the new screen CCRO will be completed with the category begin date (from CCMC), the location and address. The information displayed in the fields for serving relative only begin date, last updated date and Worker ID on CCRO was taken from CCPD.

CONVERSION TO CCCQ

1. CCCQ is a query only screen.

2. CCCQ will show the category begin date, last updated date and Worker ID. These fields will be populated with information from CCPD. The category begin date will be either the earliest date the provider was entered on CCPD as that category or the date of the earliest authorization begin date to that provider for that category. The system will choose the earlier date of the two.
3. The status code will be "CON" for conversion for all providers that go through the conversion process.

CHANGES TO CCAC

The provider location category will now show on CCAC for all authorizations. For all authorizations that go through conversion, the category will be updated with the category used to calculate the authorization amount.

CONVERSION TO CCSQ

1. CCSQ is a query only screen.
2. CCSQ will display the date that an authorization splits and the reason for the split. CCSQ will display splits that occur after the conversion. This screen will only display authorization splits due to a change in category status, caring for relative only status, and change in accreditation status or adding a provider rate.

CONVERSION TO CCRQ

1. CCRQ is a query only screen.
2. All negative adjustments made against a provider will be displayed as well as the case number, pin number, attendance begin date for the week that the adjustment was made, the original adjustment amount and the amount that has been collected.
3. The total amount of negative adjustments and the total amount that has been collected will also display.
4. Details of the collection can be viewed by pressing PF13 to CCRD.

CHANGES TO CCAF

The provider location category and category begin date have been added to screen CCAF. All authorizations displayed on CCAF will have this information as well after conversion.

CHANGES TO CCAH

1. The provider location category has been added to CCAH. All authorizations displayed on CCAH will indicate the provider location category.
2. PF14 to CCMC has been added to this screen as well.

CHANGES TO MNCP

CCQP and CCAQ have been removed from the Child Care Provider Menu. CCMC, CCPA, and CCRO are new additions to this screen

NEW PROVIDER CATEGORIES

Two new provider categories have been added. The new categories are PSCH for public school and CSAP for certified school age program. Authorizations made to PSCH and CSAP provider location categories will be paid at the licensed group rate. Rates must be entered on CCRP for both PSCH and CSAP provider locations.

A child care program operated by a public school board is not required to be regulated and is eligible for W-2 child care reimbursement. (See the Day Care Manual, Chapter 4, section 1.2.0) Any child care program that is not regulated but is operated by a public school board should have their provider location category coded as PSCH. After conversion, any provider location that is operated by a public school should be updated on CCMC to show the category as PSCH.

A child care program that is operated by a private or parochial school board is not required to be licensed or certified, unless W-2 child care funds are used in which case regulation is required.

Child care programs that care for children 7 years or older are not required to be licensed. Those programs may become certified and are called certified school age programs. The provider location category should be coded as CSAP on CCMC for these programs. After conversion, any provider location that is a certified school age program should be updated on CCMC to show the category as CSAP.

CATEGORY HIERARCHY

OCC has assigned a hierarchy to the provider categories. The hierarchy is as follows:

1. Licensed Group
2. Public School Program
3. Certified School Age Program
4. Licensed Family
5. Regular Certified
6. In-home Regular Certified
7. Provisional Certified
8. In-home Provisional Certified
9. Unregulated

The hierarchy will be used when a provider location is both licensed and certified. If a provider location is both licensed and certified during an authorization period, the category used will be the licensed category because it is the higher category in the hierarchy. Also notices and attendance report forms show the provider category. If a provider location is both licensed and certified, the highest category in the hierarchy will display on the notices and attendance report form.

Example: A provider location is both regularly certified (effective 4/3/1999) and licensed family (effective 5/10/1999) on CCMC. An authorization is entered to the provider location for the period 6/25/00 to 12/2/00. The authorization will assign the licensed family category to this authorization. This means the category associated with this authorization is licensed family. The authorization is calculated using the licensed family rates. The provider category listed on the notice is licensed family.

NOTE: The highest approved category in the hierarchy for a provider location at the time a notice or attendance report form is mailed will be displayed as the provider category. If a retro authorization is entered and the provider was certified during the authorization period, but the provider location is now licensed at the time the authorization is entered, the notice and attendance report form will indicate the provider location category as licensed. The authorization will be calculated using certified rates.

UPDATING INFORMATION FOR CONVERTED PROVIDERS FOR THE FIRST TIME

A provider location category having a status of 'CON' cannot be updated on CCMC.

Tran to CCMC and PF5 to refresh the screen the first time that a provider who was converted needs to be updated on CCMC. Enter the same provider category and the status as "APP". The new category begin date must be greater than the converted category begin date. The system will end date the converted category with a date prior to the new category begin date.

PROVIDER FILE EFFECT ON AUTHORIZATIONS:

When:

1. A provider location is:
 - a. Both licensed and certified during an authorization period, or
 - b. The provider is not licensed to care for an age group, or
 - c. The provider is certified to care for that age group.
2. And an authorization is entered for the age group that the provider location is not licensed to provide care, the authorization will be calculated using certified rates.

An authorization made to a certified provider location will not be ended by CCPS if that provider location adds a licensed category during the authorization period. An alert will be sent to the worker indicating that a provider location category has been added. The worker must end the authorization and reauthorize.

CCPS will end and recalculate the authorization when:

1. The provider location category has changed from LGRP to LFAM or vice versa.
2. The provider location category has changed from PROC to REGC or vice versa.
3. There has been a change in the accreditation status for the provider location.
4. There has been a change in the serving relatives only status for a certified provider location.
5. There has been a change of rates for a provider location.
6. A provider category has ended at a provider location.

MISCELLANEOUS

1. Certified providers must have both a category begin and end date on CCMC. The category end date can be modified if needed.
2. Both the effective begin and end date must be entered on CCRO. If the actual end date is not known when the provider will stop caring for relatives only, enter the category end date (date certification will end). The effective end date on CCRO can be modified if needed.
3. CCQR/CCQZ will show the category as LGRP when an authorization is made to a provider location whose provider category is PSCH or CSAP. This is because the authorization is being calculated using the same policy as a licensed group day care.
4. CCMC does not require a category end date for a provider location whose category is CSAP. Future enhancements to CCPS will require a category end date for the category CSAP.
5. Whenever an effective end date is changed on CCMC without pressing PF5, CCPS will update the effective end date on CCAS, CCRP, CCPA and CCRO during the CCS cycle.

CLEAN UP OF PROVIDER INFORMATION

There are providers in CCPS that have more than one location with the same location address. OCC has sent reports out to agencies where more than one provider location has the same address on CCPD. These provider locations need to be cleaned up in order to more accurately document the provider location category and the actual location where care is being provided. There are 2 circumstances where this would occur:

1. A provider was certified and licensed at the same location. For example, the provider was entered into CCPS as certified at location 1 and licensed at location 2. Location 1 and 2 are the same address.

Clean up Required Before Conversion: If location 1 and location 2 are both active, the location that indicates the provider category as certified must be deleted. All of the authorizations will end with 10-day notice. The authorizations must be entered to the location that is licensed. This should be done before provider file conversion. After conversion, the certified category can be added to the provider location.

2. A provider wanted notices and attendance report forms sent to a location other than the location where the care was actually being done. In order to accomplish this, the address where the notices and attendance report forms were to be mailed was entered in the location address.

Clean up Required After Conversion: After provider file conversion, enter the location address where the care is actually provided. PF 23 to CCAA and enter the appropriate address for notices and attendance report forms.

CHANGE TO ALL AUTHORIZATION NUMBER

All authorizations entered prior to July 30, 2000 will be renumbered. The new authorization number will be the old authorization number with the first digit changing to be the same as the last digit. For example, if an authorization number is 70002811730 prior to provider file conversion, the new authorization number will be 00002811730 after conversion. The authorization numbers are being renumbered to correct the problem of duplicate authorization numbers being assigned. The only time you will see the old authorization number is when you are entering provider attendance and the attendance report form was printed prior to the provider file conversion and displays the old authorization number.

SECURITY

Security has been set up for the new screens so that workers that have update access to provider information will also have update access to the new screens. Workers with the security profile of G, B, and S will have update access to the following new screens: CCAA, CCMC, CCPA, CCRO, and CCPU.

Benefit recovery workers will also have update access to CCPU. This is so that comments relating to provider overpayments/recovery can be entered.

The other new screens are query screens. Workers with query access to CCPS will also be able to query these screens. These screens are CCCQ, CCSQ and CCRQ.

TRAINING

Several half day training sessions on the CCPS changes due to the provider file are scheduled to take place during the week of July 31 to August 4. The training will be held at Eau Claire, Madison, Mosinee, Oshkosh, and Waukesha. The training is being provided for workers in agencies that are responsible for entering and updating provider information. Registration is being limited to 1 or 2 workers from each agency. Training announcements have been sent. Contact your regional trainer for details.

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